PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/084,791			ing Date 25/2002	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛			OTHER THAN OR SMALL ENTITY		
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),		N/A		N/A		N/A	1 == (0)	١	N/A	1 = (4)	
	SEARCH FEE		N/A		N/A		N/A		١	N/A		
	(37 CFR 1.16(k), (j), e EXAMINATION FE (37 CFR 1.16(o), (p),	E	N/A		N/A		N/A		١	N/A		
TO	FAL CLAIMS CFR 1.16(i))	or (q))	minus 20 = *				x \$ =		OR	x s =		
IND	EPENDENT CLAIM CFR 1,16(h))	s	minus 3 = *			ı	x \$ =		1	x s =		
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 ional 50 s	gs exceed 100 n size fee due for each n thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									ı			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	L	ı	TOTAL	L	
APPLICATION AS AMENDED – PART II         OTHER THAN           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL ENTITY												
AMENDMENT	07/10/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18(i))	· 3	Minus	<del></del> 20	= 0		X \$25 =	0	OR	x s =		
	Independent (37 CFR 1.16(h))	• 2	Minus	<b></b> 3	= 0		X \$100 =	0	OR	x s =		
	Application Size Fee (37 CFR 1.16(s))								_			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus	**	-	1	x \$ =		OR	x s =		
M	Independent (37 CFR 1.16(h))		Minus	***		1	x \$ =		OR	x s =		
핆	Application Size Fee (37 CFR 1.16(s))					]						
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
If the entry in column 1 is less than the entry in column 2, write 0° in column 3. The column 3 is less than the entry in column 2 in the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  He "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public with in it is lief land by the USFTO to process) an application. Confidentiality is operand by 38 US c. 122 and 37 CFR 1.4. This collection is estimated to their bet 2 minutes to complete another pathway. preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Cell's information Officer. U. S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandrius, VA 22313-1450.